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|  |  |   | <u></u>  | Jelua 9   | J. Geeloo                    | (Signature) (Date)   |
| APPLICATION NO   | FILING DATE  |   | FIRST NAMED INVENIOR   |   | ATTORNEY DOCKET NO           | CONFIRMATION NO  |
| 10/707,044 11/17/2003  |  |   | Richard M Chesbrough   |   | 71202-0048                   | 4171   |
| TITLE OF INVENTION: TISSUE LOCALIZING AND MARKING DEVICE AND METHOD OF USING SAME  |  |   |  |   |                              |  |
| APPLN TYPE   | SMALL ENTITY   | ISSUE FEE DUE   | PUBLICATION FEE DUE  | PREV PAID ISSUE   | FEE TOTAL FEE(S) DU          | E DATE DUE   |
| nonprovisional   | YES  | \$720   | \$300  | \$0   | \$1020                       | 06/19/2008   |
| EXAMINER   |  | ART UNIT  | CLASS-SUBCLASS   |   |                              |  |
| MEHTA. PARIKHA SOLANKI   |  | 3737  | 600-407000   |   |                              |  |
| <ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1 363)</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached Use of a Customer Number is required.</li> </ol>  |  |   | 2 For printing on the patent front page list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents II no name is listed, no name will be printed                      |   |                              |  |
| 3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)   |  |   |  |   |                              |  |
| Bard Peripheral Vascular, Inc. and Bard Shannon Limited Tempe, Arizona and Nieuwegein, Netherlands   |  |   |  |   |                              |  |
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| Authorized Signature   |  | 1   |  | Date 6/   | 5/08                         | Description of the second seco |
| Typed or printed nam   | 7/ //  | · · · · · · · · · · · · · · · · · · ·   |  | Registration N  |                              | and the second control of the second  |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce. P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450. Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. |  |   |  |   |                              |  |